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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 75028-307894
In re Application of STEPHEN D. KUSLICH et al.		
Application Number 10/627,589 Filed July 25, 2003		
For LAPAROSCOPIC SPINAL STABILIZATION SURGICAL METHOD		
Group Art Unit 3732	Examiner	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

- One month (37 CFR 1.17(a)(1))
- Two months (37 CFR 1.17(a)(2))
- Three months (37 CFR 1.17(a)(3)) \$980
- Four months (37 CFR 1.17(a)(4))
- Five months (37 CFR 1.17(a)(5))

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____

A _____-month extension was previously paid for. Accordingly, the fees for this 3-month extension are \$ _____.

- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 06-0029.

I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor.

- assignee of record of the entire interest. See 37 CFR 3.71
- Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06).

attorney or agent of record.

attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(e). _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

December 2, 2004

Date

Signature

Tong Wu, #43,361

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 1 form is submitted.

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